

## CLAIMS ONLY

Application Number

101721610

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5						
6						
7						
8						
9	1					
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18		1				
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32		1				
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49						
50						
Total Indep	12					
Total Depend	16					
Total Claims	18					

51	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						